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	I S 5	S U	A	N	С	E	DE	PARTME	NT ON AG	ING	<u> </u>	FI	N/	\L	,
То:	Secreta Martin I Traci W Carmen Barbara	Kennedy ard Sellens	y]] [Bill M Joyce Fina I Dave	ram and I IcDaniel Smith Langley Halferty Ichwarz	<u>Policy</u>	Admini Alice K Bob Par Brad Ri Heidi B Mike B	ker dley urris	rvices	Gre Ver	ensure, (g Reser a VanBro an Fout		ation, an	d Evaluatior
	<u>Legal</u> Joann C Greg W Susan A	right				nistratio Wiatr	n on Agi	<u>ing</u>	KHPA Sabrina Yo Roxanna N Sharon Joh	lamey		Provide Shannon KACIL KAHSA KHCA/ Craig K	n Jones, KCAL	SILCK	
								Stakeholo	lers						
	CME 01 Ruth Jones/Joseph Reardon/Loris Jones CME 02 Annette Graham/Thomas Winters CME 03 Greg Hoover/Wilmer Severns CME 04 Jocelyn Lyons/Tom Ryan CME 05 John L. Green/Ralph L. Barclay CME 06 Dave Geist/Phyllis Haltom CME 07 Elizabeth Maxwell/Eugene Highberger								CME 08 Julie Govert-Walter/J.M. Frey CME 09 Karen Wilson/Allison Mueller CME 10 Jodi Abington/Don Bales CME 11 Dan Goodman/Hannes Zacharias/Annabeth Surbaug CME 5790 Stepping Stones Unlimited, LLC CME 5999 Legacy Case Services CME Communityworks, Inc.						
Field S From: Date:	Services P Patsy Sa 7/28/10		FS 20)10-(<u>07</u>										
RE: Ho	ome and C	Commun	nity Bas	ed S	ervic	es for the	Frail Eld	derly (HCB	S/FE)						
files an		Person	Admin	istra	tion,	change "p	hysician		l form, clari requiremen						
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	Contact Contact				Krista N/A	Engel (7	85) 296- 	0385							
Related	d Referent Policy No. Change What Ro	umber(s Require eference	s): e d? e #(s)	<u>1</u>	<u>2009-</u> <u>No</u>	<u>02</u>			ded Policy I Policy Mar				Append	lices A, l	B, D, E, and I

Proposed effective date

State P	lan Change Required?	No		
If yes:	What section #(s)	<u> </u>	Transmittal Number (TN):	
	Submission Date:		Supersedes Transmittal Number:	
	Amendment Required?	<u>No</u>		
Routing	g Information:			
	Internal Route Date:	07/12/10	Internal Comments Due Date:	<u>07/26/10</u>
	Field Route Date:	<u>07/12/10</u>	Field Comments Due Date:	<u>07/26/10</u>
	KHPA Route Date:	07/12/10	KHPA Comments Due Date:	<u>07/26/10</u>
	KHPA Approval Date:	<u>N/A</u>	KDOA Approval Date:	<u>07/28/10</u>
Trainir	ng Required?			
	KDOA Central Office:	<u>No</u>	KDOA Field Staff:	<u>No</u>
	AAA Staff:	No	Contracted Case Managers:	No
	Customer Education:	No	C	
Final l	Policy: This policy char	nge and implementati	on date is effective August 1, 2010.	
	Approved 🖂	Disapprove	ed 🗌	
	/s/			
Secreta	ary of Aging			
	07/28/10			
Date				